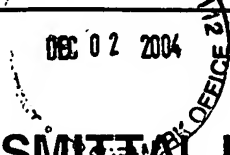
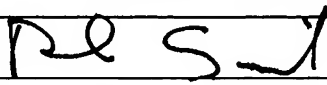



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 <b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/828,526	
	Filing Date	April 8, 2004	
	First Named Inventor	Harvey A. Schwertner	
	Art Unit	1743	
	Examiner Name	Maureen Wallenhorst	
Total Number of Pages in this Submission	10	Attorney Docket Number	AFD 490A

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts / Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to a Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Replacement Declaration and Power of Attorney
Remarks: There is no fee associated with this filing.		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT	
Firm or Individual Name	FREDRIC L. SINDER
Signature	
Date	Nov. 24, 2004

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Signature		
Typed or printed name	FREDRIC L. SINDER	Date November 24, 2004



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appl. No. : 10/828,526  
Applicant(s) : Harvey A. Schwertner  
Filed : April 8, 2004  
Title : BILIRUBIN TESTS AS RISK PREDICTORS FOR SYSTEMIC  
LUPUS ERYTHEMATOSUS AND PSORIATIC ARTHRITIS

TC/A.U. : 1743  
Examiner : Maureen Wallenhorst  
Docket No. : AFD 490A

Honorable Commissioner of Patents  
Washington DC 20231

**AMENDMENT**

Sir:

In response to the Office action of August 25, 2004, please amend the above-identified application as follows:

**Amendments to the Specification** begin on page 2 of this paper.

**Amendments to the Claims** are reflected in the listing of claims beginning on page 3 of this paper.

There are no **Amendments to the Drawings** in this paper.

**Remarks/Arguments** begin on page 6 of this paper.